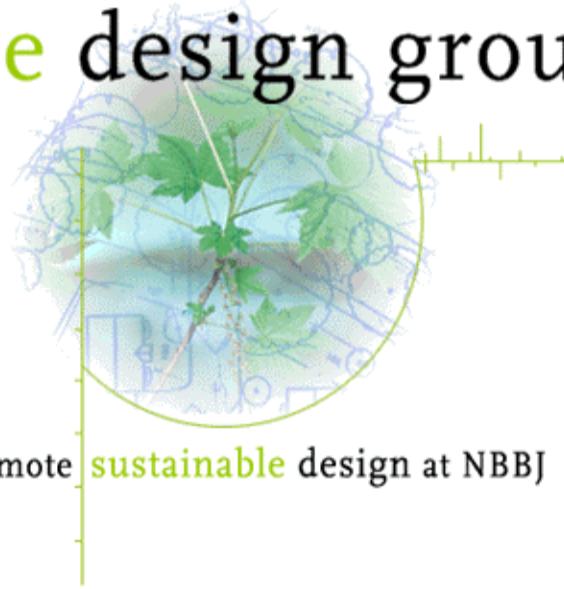


# sustainable design group



To promote sustainable design at NBBJ

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# Why Sustainable Design?

## Trends:

- **Increasing resource depletion**

*The amount of oil used in the last 100 years is equal to the amount of known reserves....(SA)*

*China is losing 1,000 square miles to desert each year....(ENN)*

Increasing costs for energy

- **Large waste by products**

*Hospitals produce 6,600 tons of waste a day...(EPA)*

- **Pollution**

*The costs of climate change will reach \$300 billion annually....(ENN)*

*2000 was the sixth hottest year on record....(ENN)*

- **Social equity**

*5% of the worlds population use 30% of the worlds resources*

***Buildings account for 36% of primary energy consumption...(EIA)***

# Resource Consumption in Medical Facilities

## **Initial Consumption:**

- Expensive to build - \$250 - \$350 / SF
- Rapid obsolescence

## **Ongoing Consumption:**

- High resource consumption over time.
  - Equipment intensive; supply intensive.
- High energy consumption. 2-3 x commercial buildings.
- Generates large amounts of waste - 6,600 tons/ day
  - Medical waste
  - Hazardous waste
  - Normal waste
  - Renovation & construction debris

# Healthy Buildings = Healthy Communities

## Environment should do no harm:

- Infectious diseases
- IAQ problems – odors, CO/ fume intrusion, air changes, temperature
- Safety and security
- Traffic and neighborhood impact

## Environment should be a healing place:

- Inviting & comfortable.
- Appropriate for activities.
- Incorporate nature – views, landscaping, materials.
- Offer opportunities for respite, privacy and quiet.

Create unique spaces and experiences.



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# Healthy Buildings = Healthy Communities



# Sustainable Design Initiatives for Health Care Facilities

- **USGBC – LEED program – *Leadership in Energy and Environmental Design***
- **EPA – Energy Star Buildings**  
*An opportunity to improve the energy performance of facilities and significantly reduce operating expenses*
- **H2E – EPA/ AHA – *Hospitals for a Healthy Environment***  
*Goals are to eliminate mercury from health care by 2005 and reduce the total volume of waste generated by 50 % by 2010.*
- **European Energy 2000 Program –**  
*10 year effort to reduce energy consumption by 20%*

# EPA – Energy Star Program

- **Voluntary**
- **5 Step process to improve energy efficiency**
- **Starts with improving lighting efficiency**  
*(former Green Lights Program)*
- **Provides for energy use benchmarking**
- **Provides tools, advice, financing option, etc.**
- **Over 800 hospitals have signed up for the program**

*Since 1991, ENERGY STAR Healthcare partners have saved over \$200 million on utility bills while preventing millions of tons of pollutants linked to respiratory diseases, acid rain, and climate change.*

# EPA – Energy Star Program

- *Kaiser Permanente – Northern California –  
Upgrading the lighting in 129 buildings resulted in 23% reduction  
in electrical costs.*
- *Columbia/ HCA implemented lighting upgrades in 100 buildings  
At \$27m with an annual savings of \$7.8m or 35% IRR.*
- *St. Charles Hospital – Bend Oregon –  
Energy Star – reduced energy use by 38%*



# Planning for Sustainable Design

**Strategy:** *The right facilities in the right place when needed.*

## **100+year decisions**

- Site selection
- Floor to floor heights

## **30+/- year decisions**

- Mechanical infrastructure

## **10-20 year decisions**

- First occupancy – interior fit out

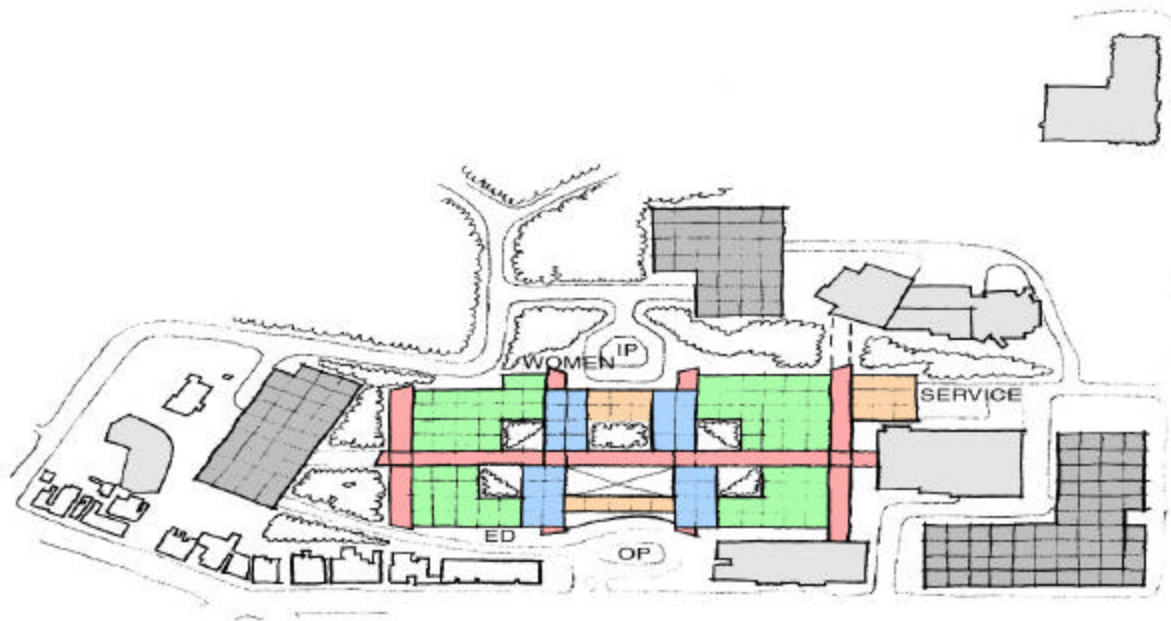
# Planning for Sustainable Design

**Strategy: *Plan for Phased Replacement and Growth***



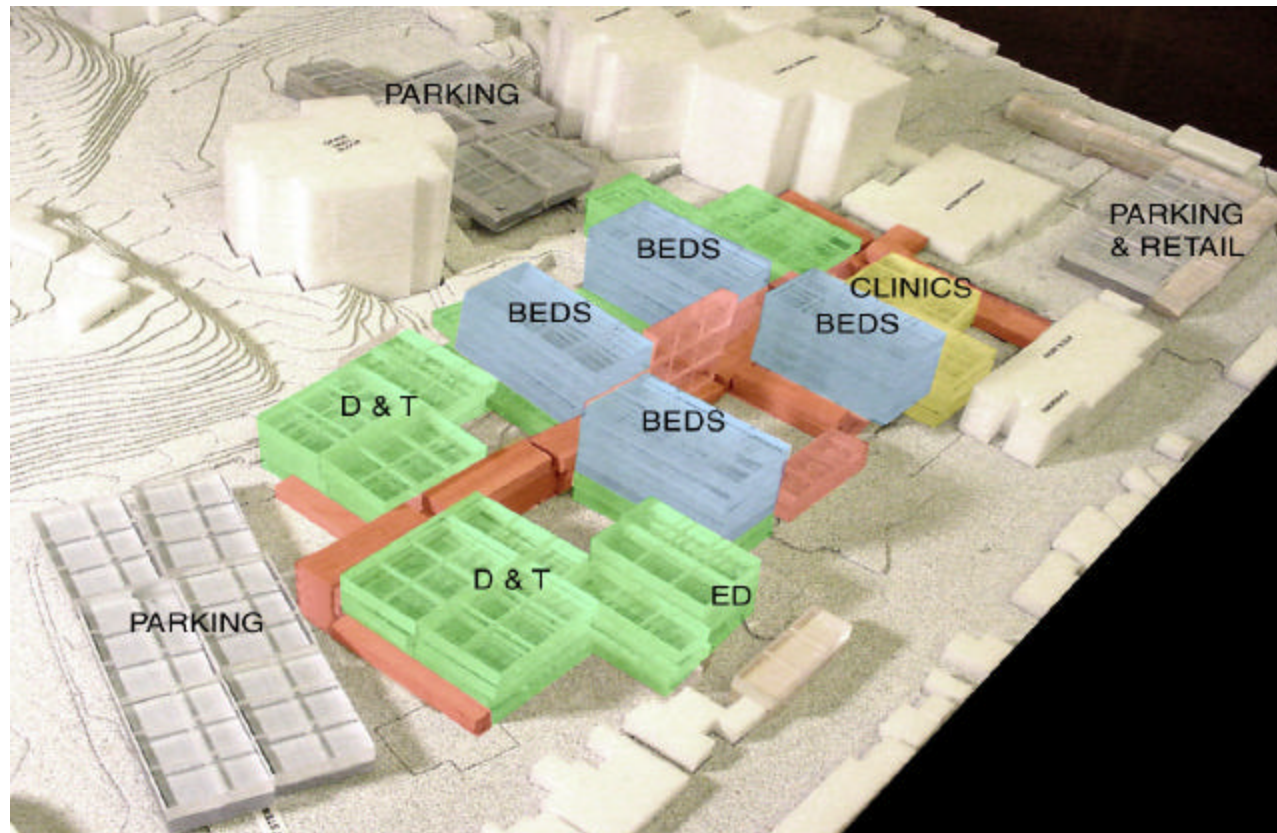
# Planning for Sustainable Design

**Strategy: *Plan for Phased Replacement and Growth***



# Planning for Sustainable Design

**Strategy: *Plan for Phased Replacement and Growth***



# Planning for Sustainable Design

**Strategy: Plan to avoid early obsolescence**

**- *Premature obsolescence = waste***

**Building Obsolescence factors:**

**Building size/ shape**

- Good – large, regular floor plates
- Bad – narrow, irregular floor plates

**Structure:**

- Good – Oversized to anticipate future code changes
- Bad – Limited provision for future.

**Structure:**

- Good – Regular structural grids, long spans, clear space.
- Bad – Irregular structural grids, short spans, shear walls.

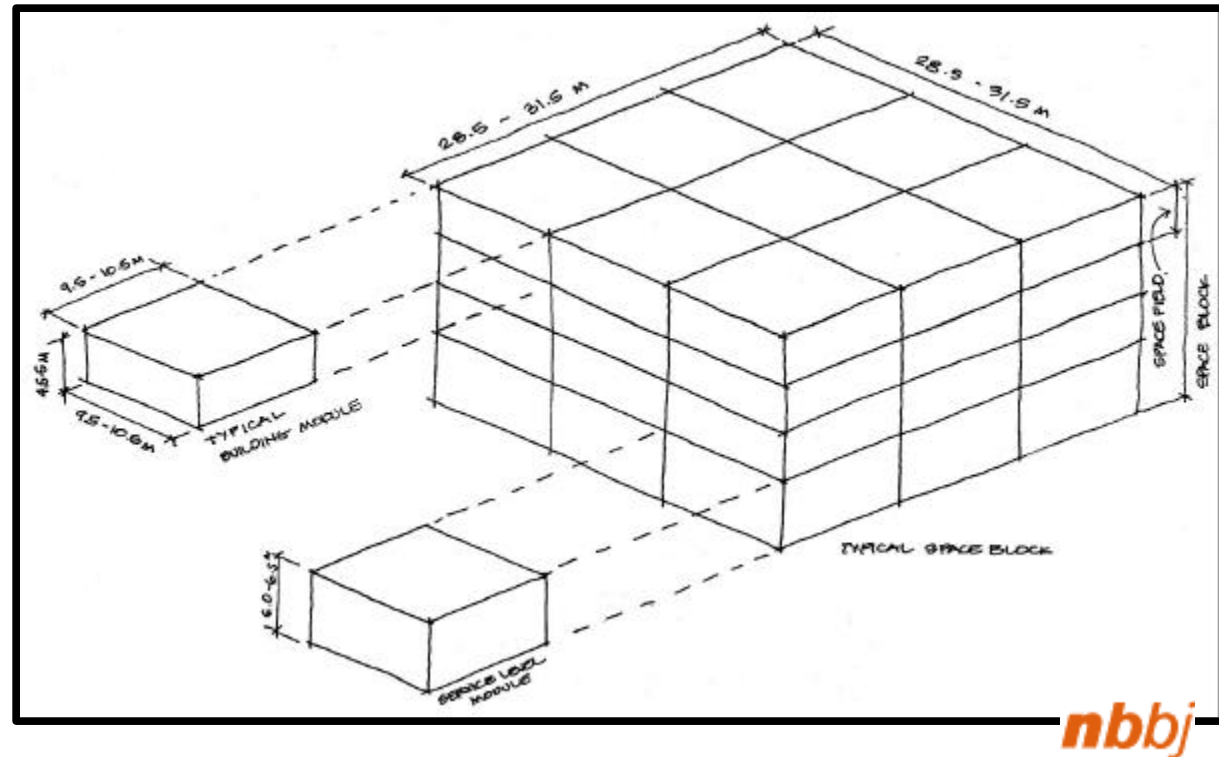
**Structure:**

- Good – Higher floor-to-floor dimensions.
- Bad – 12-13' or less floor-to-floor dimensions.

# Planning for Sustainable Design

## Strategy: Adopt a “Universal Planning Module”

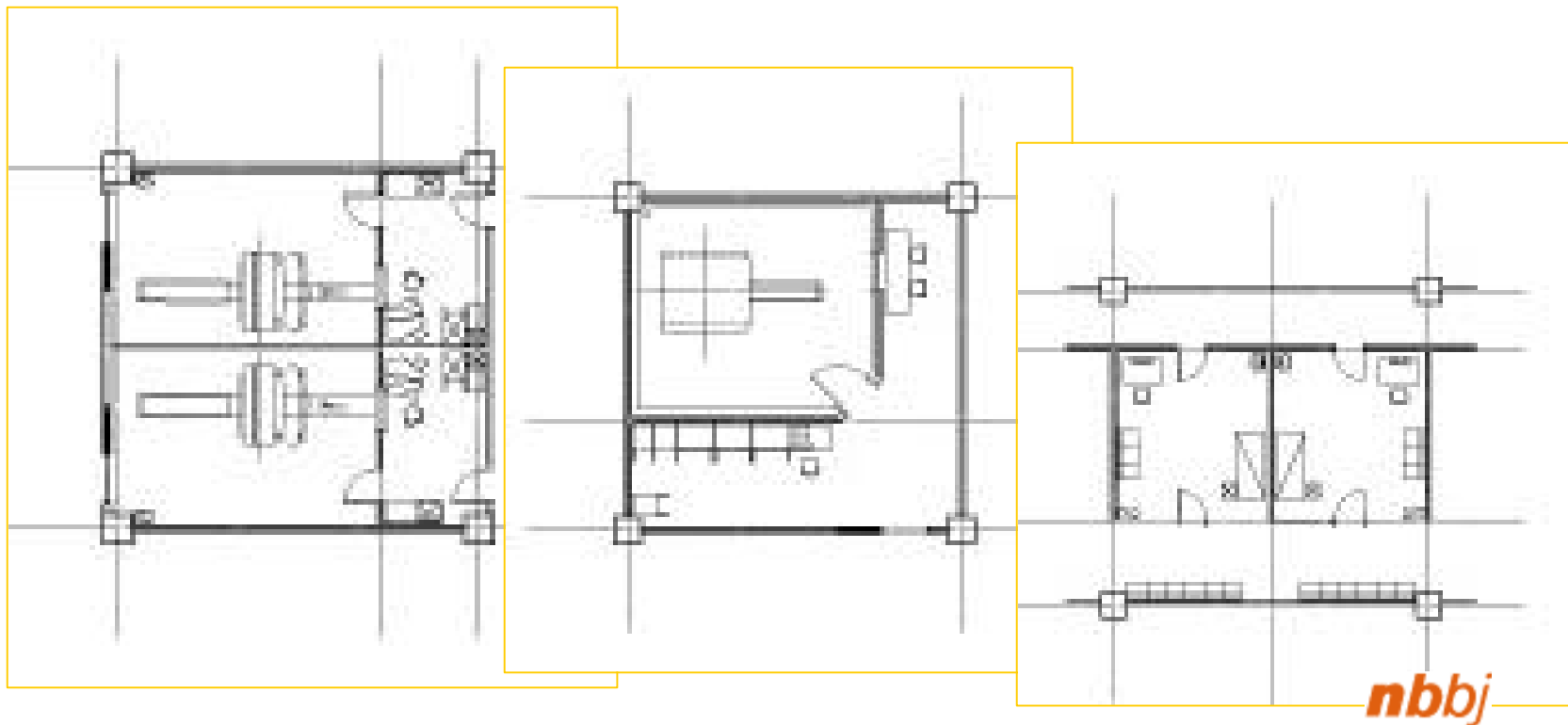
- Space field



# Planning for Sustainable Design

## Strategy: Adopt a “Universal Planning Module”

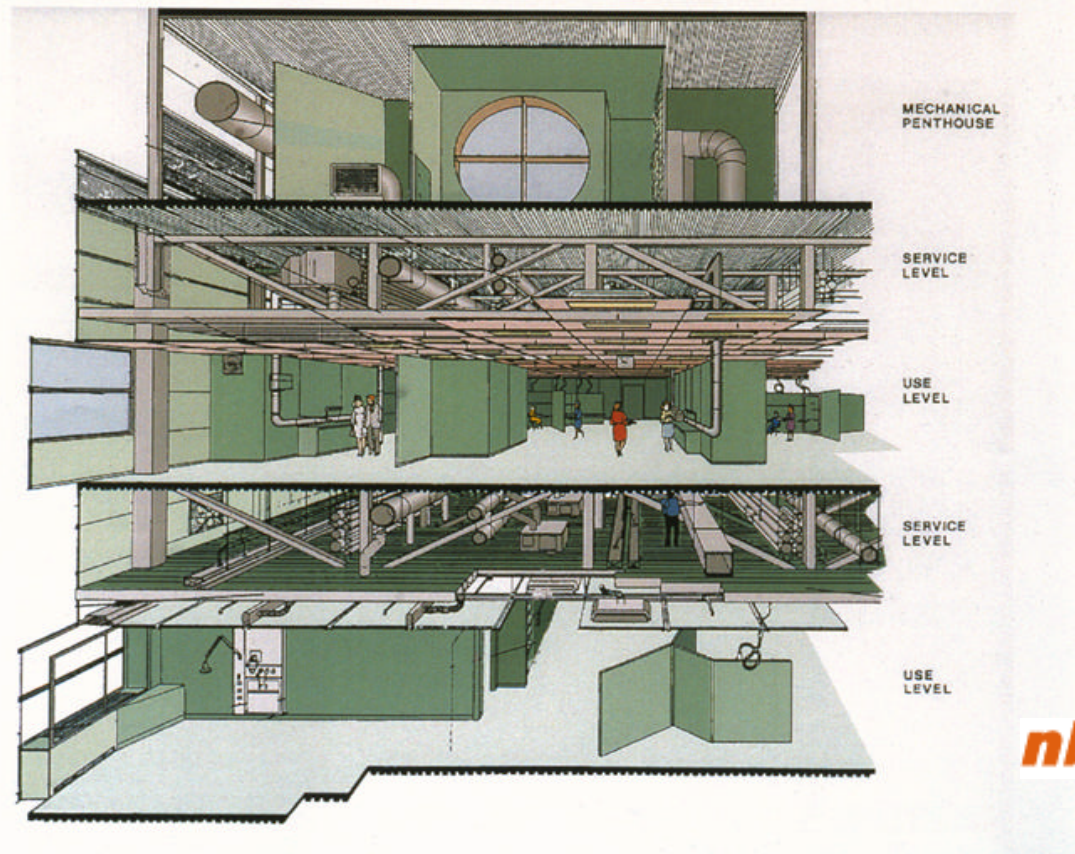
- Universal Building Module





# Planning for Sustainable Design

## Strategy: Utilize an Integrated Building Systems Approach





# Planning for Sustainable Design

## **Planning Strategies Summary**

**Plan for short term and long term needs**

– initial + future potential occupancies

**Loose Fit vs. Tight Fit planning**

**Utilize “Universal” planning guidelines**

**Design for sustainable operations**

# Planning for Sustainable Design

## **Hospital Of The Future:**

*Need Facility Design That...*

*Facilitates Change*

*Is Affordable In First Cost*

*Is Effective Long-Term*

*Contributes To Healing*